City of Boston Registry Division

REQUEST FOR A CERTIFIED COPY OF A MARRIAGE CERTIFICATE

WHAT TO INL 1. Request:	CUDE WITH YOUR REQUE Completed Request Form		signature.	
2. Payment:	Certificates cost \$15.00 for the first copy and \$12 for each additional copy when ordered through the mail. Requests for records prior to 1870 require an additional \$10 research fee on a separate check, and this fee is not refundable. Payment may be made in check or money order payable to "City of Boston."			
3. ID:	A photocopy of your Identification (Driver's License, State ID, Passport).			
4. Return:	Please include a self-addressed stamped envelope.			
	Print out this form and retu Registry Division One City Hall Sq Boston, MA 0220 *Ple:	- Marriage uare, Room 213	strictions and Spe	cial Circumstances
Number of co	pies requested:			
Date of M	larriage: Month	Day	Year	
Party A - Full	Name including:			,
irst	Middle	Last		Maiden Name if applicable
Party B - Full	Name including:			
	 			1
First	Middle	Last		Maiden Name if applicable
Person Reque	esting the Certificate:			
Relationship o	of requester to subject(s) r	named on record:		
Return Mailin	g Address:			
Signature of F	 Reguester:			
_	-	E	Email:	
		rried at the time of the		the record is restricted. ONLY those listed on the
•	ficate can request a copy and		•	
	ding multiple requests for birt certificate and two birth certi			
If we do not ha	ave the record we will call and	d/or return the check in	n the self-addresse	d stamped envelope that you have included with

your request.